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Attorney Docket: S00-042

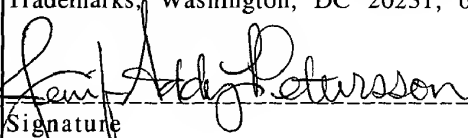
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Number: 09/597,966
Filing Date: 06/20/00
Applicants: Xiaochun Li
Application Title: Embedded Sensor, Method for Producing, and
Temperature/Strain Fiber Optic Sensing System
Art Unit: 2877

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231, on

8/21/00

Date of deposit


Signature

JENNIFER ANDRY PETERSON
Name of Person Signing

8/21/00

date

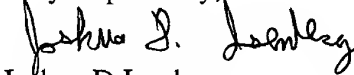
CORRECTION REQUEST

Commissioner of Patents and Trademarks
Washington, DC 20231

Dear Sir:

Kindly amend the title of application number 09/597,966 from "Embedded Sensor, Method for Producing, and Remote Temperature/Strain Fiber Optic Sensing System" to -- Embedded Sensor, Method for Producing, and Temperature/Strain Fiber Optic Sensing System -- as indicated on the enclosed copy of the filing receipt.

Very respectfully,


Joshua D Isenberg
Agent of record

JAP

FILING RECEIPT

OC00000005314671

**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**Address: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|-----------------|----------|------------|------------|
| 09/597,966 | 06/20/2000 | 2877 | 0 | S00-042 | 5 | 63 | 3 |

Joshua D Isenberg
Lumen Intellectual Property Services
Suite 110
45 Cabot Avenue
Santa Clara, CA 95051



Date Mailed: 08/10/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

Applicant(s)

Xiaochun Li, Residence Not Provided;

Continuing Data as Claimed by Applicant

THIS APPLN CLAIMS BENEFIT OF 60/142,348 06/30/1999
AND CLAIMS BENEFIT OF 60/187,240 03/03/2000

Foreign Applications**Title**

Embedded sensor, method for producing, and remote temperature/strain fiber optic sensing system

Preliminary Class

356

Data entry by : LEGESSE, ALTAYEWORK

Team : OIPE

Date: 08/10/2000



Receipt 0820



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| TRANSMITTAL FORM (for all correspondence after initial filing) | Attorney Docket No. S00-042 | Total Pages 3 |
| | Application Number 09/597,966 | |
| | Filing Date 6/20/00 | |
| | First Named Inventor XIAOCHUN LI | |
| | Group Art Unit 2877 | |
| | Examiner NOT ASSIGNED | |

| ENCLOSURES (check all that apply) | |
|--|--|
| <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) | <input type="checkbox"/> Response to Notice of Missing Parts |
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Small Entity Statement |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Declaration by Inventors |
| <input type="checkbox"/> Response/Amendment | <input type="checkbox"/> Assignment papers |
| <input type="checkbox"/> After Final Rejection | <input type="checkbox"/> Power of Attorney by Assignee |
| <input type="checkbox"/> After Allowance communication to Group | <input type="checkbox"/> IDS/PTO-1449 |
| <input type="checkbox"/> with Corrected Drawing(s) Total Sheets: [] | <input type="checkbox"/> with copies of cited references |
| <input type="checkbox"/> with Affidavits/Declarations | <input type="checkbox"/> New Power of Attorney and Revocation of Old |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Change of Correspondence Address |
| <input type="checkbox"/> Express Abandonment Request | <input checked="" type="checkbox"/> Other: Data Correction Request |

| SIGNATURE OF AGENT | |
|--------------------|--|
| NAME | JOSHUA D. ISENBERG, REG. NO. 41,088 |
| Signature | <i>Joshua D. Isenberg</i> |
| Date | 8/21/2000 |

| Certificate of Mailing by "Regular Mail" | |
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| <i>Jennifer Addy Petursson</i> SIGNATURE | DATE OF MAILING: 8/21/00 |
| JENNIFER ADDY PETURSSON | |